101PE		المقد				PTO/SB	268/ FA	
MOV 0 4 2002	Co		Application Number	09/82	24378			
TRANSMITTAL FORM			Filing Date		2/2001			
			First Named Inventor		Chaker T. Al Hakim et al.			
(to be used for	all correspondence after	initial filing)	Group Art Unit	2681	2681			
			Examiner Name	Not Yet Assigned				
Total Number o	of Pages in this Submission	on 28	Attorney Docket Number	2000-		FIVED		
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		•••	Enclosures (chec	k all that	apply)		1v Center 2600	
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		Remarks	CORRESPONDEN	CE AD	DRESS			
						]		
☑ Cust	omer Number or Bar Code L	abel	Customer Number - 26652			or   Correspondence address below		
NAME	Samuel H. Dwo	retsky						
ADDRESS	AT&T CORP. P.O	). Box 4		<del></del>		715 665	1 07740 4440	
CITY	Middletown United States	of Amer		STATE	New Je	rsey ZIP CODE FAX	732-368-6932	
			OF APPLICANT, ATTO	DRNEY.	OR AGE		1 030 0302	
NAME	Michele L.		,				962	
TELEPHONE 908-532-1879								
SIGNATURE	Mielel	· A	Conner			DATE 10	/29/2002	
			CERTIFICATE C	F MAIL	ING			
I hereby certify t envelope addres	that this correspondence ssed to: Commissioner fo	is being dep or Patents, W	osited with the United States /ashington, D.C. 20231 on the	Postal S is date: 1	ervice with su	ufficient postage thereon as 02	first class mail in an	
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Filing Date	04/02/2001						
First Named Inventor	Chaker T. Al Hakim et	al.					
Examiner Name	Not Yet Assigned						
Group/Art Unit	2681						
Attorney Docket No.	2000-0567						

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104 280	Multiple Dependent Claims		149	740	(37 CFR 1.129(a)) For each additional inv	ention to	be	
109 84	** Reissue independent claims over original patent		149	740	examined (37 CFR 1.1			, t
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SUBMITTED BY Complete (if applicable)								
Typed or Reg.  Printed Name Michele L. Conover Number 34962					962			
Printed Name	Michele L. Conover				<del></del>	INUITID	5 34	202
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